



## Biz Kid\$ Camp Application

***Please print***

Applicant name: \_\_\_\_\_

Birth date: \_\_\_\_\_ School: \_\_\_\_\_ Grade: \_\_\_\_\_

Address: \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

Guardian Name & Relationship: \_\_\_\_\_

Guardian Name & Relationship: \_\_\_\_\_

Address (If different from above): \_\_\_\_\_ Zip \_\_\_\_\_

Phone #: \_\_\_\_\_ Alternate Phone #: \_\_\_\_\_

**T-Shirt Size:**   small                      medium                      large                      XL                      2 XL                      3 XL

**Will your child be dropped off or will he/she walk to the camp?** (Please Circle)      **dropped off**                      **walk**  
**Is your child authorized to walk home alone?** (Please Circle)      **YES**                      **NO**  
*If not, who is authorized to pick up your child?*

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

**List additional emergency contacts if parent/guardian (named above) cannot be reached:**

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

Name: \_\_\_\_\_ Relationship \_\_\_\_\_ Phone # \_\_\_\_\_

**Does your child have any medical conditions or special learning needs that staff should be aware of?**

**NO**                      **YES**      *If yes please specify:* \_\_\_\_\_

**Has your child attended a Biz Kid\$ camp before?** (Please Circle)                      **Yes**                      **No**

**If yes, what month and year did they attend camp?** \_\_\_\_\_

**SESSION CHOICES (13-18 year-olds: February 16<sup>th</sup>-20<sup>th</sup>, March 30<sup>th</sup>-April 3<sup>rd</sup>)**  
**(10-13 year-olds: July 20<sup>th</sup>-24<sup>th</sup>, August 3<sup>rd</sup>-7<sup>th</sup>)**

First Choice \_\_\_\_\_

Second Choice \_\_\_\_\_

## **Biz Kid\$ Camp Permission & Participation Agreement**

*(please review and sign)*

I deem that my child \_\_\_\_\_ is capable of participating in the Biz Kid\$ camp. In consideration of your accepting this application for participation in "Biz Kid\$", I intend to be legally bound, hereby, for myself, my heirs, executors and administrators waive and release any and all rights and claims of damages I may have against the City of Rochester, the Bureau of Recreation and their representatives, successors, and assigns for any and all injuries which may be suffered by my child. If an accident occurs, I give my permission for emergency treatment.

I give my child permission to participate in field trips to **(please INITIAL all approved trips)**:

- \_\_\_\_\_ ARC of Monroe DeliWorks for lunch and Hot Chocolate/Lemonade Stand preparation on Tuesday of camp week. The vehicle/bus will leave the camp location at approximately 12:30 pm and return at approximately 3:30 pm.
- \_\_\_\_\_ City Hall for the Hot Chocolate/Lemonade Stand business competition on Wednesday of camp week. The vehicle/bus will leave the camp location at approximately 11:30 am and return at approximately 2:30 pm.
- \_\_\_\_\_ Rochester Central Library for a small business resource workshop on Thursday of camp week. The vehicle/bus will leave the camp location at approximately 9:30 am and return at approximately 12 pm.
- \_\_\_\_\_ Field trip on Friday of camp week. The vehicle/bus will leave the camp location at approximately 1 pm and return at approximately 2:30 pm.

I understand that he/she will be transported in a City-owned vehicle or rented bus.

I give permission to the City of Rochester to record the image and voice of my child, for purposes of the City of Rochester Department of Recreation and Youth Services.



\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

**As a participant in the Biz Kid\$ Camp, I agree to complete all Biz Kid\$ sessions provided by the City of Rochester Bureau of Recreation and to follow the Department of Recreation and Youth Services' Code of Behavior (attached)**



\_\_\_\_\_  
Child signature

\_\_\_\_\_  
Date

**PLEASE COMPLETE THE APPLICATION AND THE PERMISSION & PARTICIPATION AGREEMENT AND SEND TO:**

**Biz Kid\$**  
**400 Dewey Avenue**  
**Rochester, NY 14613**  
**Phone: 585-428-7371**  
**Fax: 585-428-6021**

# Code of Behavior

-  **Follow all center rules.**
-  **Show good sportsmanship** and invite others to join in.
-  **Go to staff if you need help** resolving a problem or dispute
-  **Use appropriate language and gestures** that respects the feelings of others.
-  **Respect City and private property.**
-  **Respect the decisions** of all coaches, referees and staff.
-  **Keep yourself and others safe** by not bringing weapons into the center.
-  **Demonstrate self control** to avoid hurting yourself or others.

*In order to help Recreation Staff provide a safe and nurturing atmosphere at all Recreation Centers, participants are **required** to adhere to the **Code of Behavior** to avoid suspension or other consequences.*